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ABSTRACT

Each year thousands of children, of all ages and ethnic and economic backgrounds, are victims of sexual and physical abuse. This case book, intended for use in the training of social workers and prevention-focused program staff, parents, providers, adolescents, and others, consists of 16 cases of child abuse in Hispanic communities. The cases are drawn from the following settings: (1) schools; (2) hospitals; (3) courts; and (4) social service agencies. Each case presents its own set of issues and problems. Each cases is accompanied by a set of questions to guide discussions or enhance lectures. This case book is intended for educational purposes only, and should be used in conjunction with examples from other communities; it does not purport to represent the incidence or prevalence of child abuse in the Hispanic community. (BJV)

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HISPANIC HEALTH COUNCIL

RESOURCES ON CHILD ABUSE PREVENTION

CHILD ABUSE CASES IN AN HISPANIC COMMUNITY:

A TEACHING TOOL

HISPANIC HEALTH COUNCIL

Research, Advocacy and Training in Health and Education

98 CEDAR STREET 3A
HARTFORD, CONNECTICUT 06106
(203) 527-0856

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CHILD ABUSE CASES

INTRODUCTION

Each year thousands of children, of all ages, ethnic and economic backgrounds, are victims of sexual and physical abuse. Professionals, as well as, parents and the children confront a myriad of problems in dealing with these issues. The reporting of child abuse has increased dramatically in recent years. The American Humane Association through a national study found that since 1976 there was a 200% increase in the reporting of child sexual abuse. It is not clear if the increases in reporting is due to an increase in child sexual abuse or to a better informed and concerned public. Regardless of the reasons, child abuse is a serious problem.

Child abuse, although a popular social issue, is also very difficult to understand and address. It becomes more difficult to address as the issue becomes highlighted in minority communities. For Hispanics it is complicated, not only when race is introduced but also language; culture and recency of arrival.

One tool often used in training and educational experiences of professionals are case materials. Through the Hispanic Health Council's Proyecto Esperanza a number of cases were collected. This collection of cases are organized in case book format. This case book is intended for use in educational settings such as in the training of social workers and prevention focused training programs for parents, providers and adolescents and others.

Each case presents its own set of issues and problems. The cases are described with a set of questions to guide discussions or enhance lectures and other curriculum needs. Although, the case information was used to address child maltreatment in Hispanic communities, each case could be presented as if it came from any community. As will or should be clear the examples portray child abuse, not a particular ethnic or economic community.

It is important to state that these cases do not represent a random sample selection. The cases come from, schools; hospitals; courts; and social service agencies. Many people contributed to this effort, and therefore, do not follow a particular pattern. As much information as was possible to obtain was included.

Another important point to remember is that these cases do not represent the incidence or prevalence of child abuse in the Hispanic community. Although a majority of the cases are of sexual abuse of adolescent girls, the reality is that Hispanics in Connecticut, as an example, have the lowest confirmed rate of child sexual abuse. Yet, in the area of physical abuse, Hispanics were found to have the highest confirmed rate (see the Hispanic Health Council's report of maltreatment in Connecticut, September 1985).

The purpose of this case book is to assist trainers, teachers and facilatators, when using examples in a training context. It is not to intended to raise more sterotypes and misconceptions. This case book should be used with other materials and when possible with examples from other communities.

Case # One

Maria was around 14-15 years old when she decided to disclose her secret. Her father no longer wanted to just be fondled, masturbated, or ejaculated by Maria, he wanted to go further, now he wanted full vaginal penetration. But, Maria wouldn't let him. He often told her that he was going to be the first one to penetrate her, that no other man will have intercourse with her until he did.

She continued to feel discomfort with what was going on, but didn't know what to do. Maria's thoughts were that once she turned 18 years old, she was going to leave home and her problems would end. The disclosure happened when one day Maria's younger sister saw their father kissing Maria inappropriately on the mouth (as if he was kissing his wife). Maria's sister was very upset at what she saw and questioned Maria. Maria then told her sister the details of what had happened between her and their father.

Very upset, Maria's sister questioned her father about the alleged sexual abuse. She told him off, cursing at him , the father slapped her. Afterwards, Maria's sister went to their mother and told her everything Maria had said. The mother not believing what the daughter was saying, went to speak with her husband. He denied everything and their mother believed him.

The following day a state child protection worker accompanied by a police officer, went to Maria's house. The worker explained to Maria's mother about the report of sexual abuse of Maria by her

father. The mother denied any knowledge of the abuse or that Maria's sister had come and told her. At the time of the visit by the S.W., the father 's whereabouts were unknown. The S.W. believes that the mother may have warned the father earlier that day or the previous night about the allegations of abuse.

Maria was placed in a shelter. She did not want to return home until she was sure that her father was completely out of the picture. While at the shelter, Maria continued attending school and working at her part-time job in an insurance agency. Yet, she was still afraid that her father would find and harass her. She asked her older brother to walk her to her job and back to the shelter.

After two months in the shelter, Maria was ready to return home. On the scheduled day to leave, her brother came to the shelter to warn Maria that her father had returned to the house. Maria was very upset. She called the S.W. and told her that she was not going back home because her mother was back with her father.

The S.W. went to visit the mother and explained to her that Maria refused to come home while her father was there and that Maria was very afraid, and nervous. The S.W. only spoke with the mother, the father was not home at the time of the visit. The mother agreed to go to the shelter to talk with Maria. Through a family therapy session, Maria questionned her mother why she let her father come back home, her mother's response was that she felt sorry for him.

The S.W. was supportive of both the mother and the daughter, she referred them for family therapy. After that session Maria stayed at the shelter for about a week and then returned home. The mother comfronted the father and asked him to leave.

He left to Puerto Rico.

Maria and her mother are in family therapy and Maria continues going to school and working part-time.

Questions

1. What are the issues in this case?

2. What questions were left unanswered?

3. What problems do you see in the intervention? What recommendations would you make?

4. It appears that the strategies used by the worker seem successful. Do you agree? If yes, please outline them. If no, why not?

5. What additional information do you need to develop an effective intervention strategy?

6. What recommendations do you make for providing services to Maria? her mother? her father? the other children in the family?

7. Did you find any issues that were particular to this family, that you wouldn't find in anglo or black families?

Case 2

Rosa is a 15 year old female who was physically and sexually abused for the past five years by her biological father. Her father is an alcoholic with a history of abuse. He abused his wife and in the past, abused Rosa's older sister. The sister is 20 and no longer lives at home.

Rosa's family consists of both parents and 4 other children. Only Rosa and one brother still live at home. Rosa's sister and two older brothers live on their own. Rosa's father in addition to the physical and sexual abuse, used threats and fear to keep Rosa, her mother and sister quiet. It was not until Rosa's older sister learned of the abuse towards Rosa that she opened up about her own abuse. Including vaginal penetration.

About four months ago, a state protection worker received a call from a white male social worker at a local Hospital Emergency Room (ER). He reported that a young girl had been brought in by the police for attempted suicide, although the details are unclear.

Rosa was admitted to the hospital. The ER social worker was unable to get any information from Rosa. It was not until a Hispanic social worker from the State Child Protection Agency interviewed Rosa for the third time did she open up about the abuse. Rosa's father had used threats and Rosa was afraid, but finally she told the social worker that the physical abuse began at a "young age".

When she turned 10, her father began fondling her, kissing her around her genital and around her breast. Rosa never told anyone what was going on, she was afraid. Apparently when the sexual abuse got to the point where her father wanted to penetrate her, she decided to end her life. Once her secret was revealed to the social worker, the mother was informed. The mother was shocked, but was very supportive. She was also a victim of abuse by her husband and was afraid of him.

While Rosa was admitted in the hospital, there were times when the social worker noticed Rosa's behavior change (she would close herself up and would appear nervous, poor attention span, etc.). When the social worker asked Rosa about her behavior, Rosa told the social worker that her father called her and threaten her to keep her quiet about the sexual acts.

The social worker was also told by Rosa's 12 year old brother, that many times when he saw his father beat up his sisters then he would go on to have sex with them. Neither of the sisters knew what was happening to the other one,

After the abuse was disclosed, Rosa's father was arrested. The social worker doesn't have any more information on what happened to the father. As reported by the social worker the communication between the State and the legal system is very poor.

After the social worker worked on the immediate crisis she referred the case to another unit within the State Child Protection Agency.

The social worker was upset with the way this case was handled at the hospital emergency room, she felt that there should have been a Hispanic female social worker handling this case, not a white male. If not a Hispanic woman than at least a bilingual bicultural man. She stronly believes that Rosa would have never opened up about her sexual abuse to the white male social worker.

Questions

1. Do you agree with the social worker that a bilingual/bicultural social worker would have been better? Why?

2. Identify the issues you see in this case.

3. What polices would you recommend to address the issues stated in question #2?

4. What resources are needed to implement the policies?

Case 3

The following case is an example of a child considered "at risk". This case was referred to the State Child Protection Agency by a school social worker.

A school social worker called the State Child Protection Agency to refer a case of possible "at risk case". This case is of a 14 year old girl that is living at home with her mother and a younger brother who is 9. The 9 year old brother told his teacher that his 14 year old sister was living with a 19 year old man. The school teacher spoke with the social worker and referred the case for an investigation.

A Hispanic social worker went to visit the home of the 14 year old. The social worker talked to the mother and explained the reason for the visit. The mother was calm but was not surprised to hear about her daughter's relationship with a 19 year old man. The mother explained to the social worker that she was very happy with her daughter's relationship and that she herself was married at the age of 15 to an older man. Also her oldest daughter was married at the age of 14 to an older man, therefore, she didn't see anything wrong with her 14 year old daughter dating an older man.

The mother appeared to be very happy with her daughter's choice. She told the social worker that this 19 year old man had good intentions for her daughter that he was going to make her happy and be a good husband. The mother denied that her daughter's boyfriend was living in the same home with them.

The social worker then scheduled a meeting for the following week to talk to the mother, the boyfriend and the 14 year old daughter. The social worker's reason for the meeting was to explain to all the parties concerned that this 14 year old was still a minor and legally they could be held accountable if anything happened to her. She also talked to them about birth control methods. The mother was agreeable to let her daughter begin using contraceptives.

During the meeting the boyfriend told the Social Worker that all of them (referring to the 14 yr. old, the mother and himself) had been afraid that the worker would take the 14 year old away from home. They had even thought of hiding the girl. The social worker explained to the family about the role of the State and that there was no reason for them to take the girl away from home.

Questions

1. Would you agree with the social worker that there was no reason to take the girl out of the home?

2. Was it the role of the Social Worker to provide information on birth control methods?

3. What issues do you see with this case?

4. How would you address them?

Case # 4

Carmen is a 15 year old girl who lives with her mother and brothers. Her father died many years ago. He was an alcoholic who abused his wife and children. The mother remarried.

A few weeks before school finished Carmen had a fight with another student and was suspended from school. Apparently Carmen's behavior was disruptive in school, she's been acting out for quite sometime. The school refused to take Carmen back.

The school nurse notified Carmen's mother about her disruptive behavior and suggested that Carmen see a therapist.

Carmen was taken to a local hospital where she was admitted to the inpatient psychiatric ward. Carmen reported to the hospital social worker that she was being physically abused by her mother and brother. The hospital social worker then called the State Child Protection Agency.

The social worker talked to the mother about the allegations, and she denied them. The mother told the social worker that her relationship with her daughter was good, and that there were no problems between them.

A second meeting was held at the hospital with Carmen, her mother, her stepfather, and both the social worker from the State and hospital. The purpose of the meeting was for the social workers to get an idea of the type of relationships in the family. Carmen did not say much except to answer yes and no to questions. The stepfather appeared to be very concerned and cooperative.

It was not clear if the allegations were true or not. The State social worker was unable to find out if the mother and Carmen's brother were physically abusing her. The mother and daughter were referred for counseling in a local outpatient clinic.

The State social worker was very upset with the school. She accused them of being "negligent" because the school should have been in contact with Carmen's mother when they first noticed the behavior change.

Questions

1. Did the school staff have any responsibility for notifying the parent that there is change in the adolescent's behavior?

2. If you were one of the social workers in this case, how would you have handled this case ?

3. How is physical abuse verified? What are the guiding principles?

4. Do you argee that the school was negligent?

Case # 5

Luis met Jose and his family when Jose was ten years old. Luis became attached to Jose and played the role of a big brother. Luis took him to parks, bought him ice cream, clothes etc. Jose grew up and moved out of Hartford. Ten years later, Jose returned to Hartford married and with his two children boys, aged six and four.

Luis and Jose met again in Hartford and Jose invited Luis to his house to come and meet his family. Jose's wife and children liked Luis, and once again Jose took the role of a big brother to the children.

One day the children refused to go visit Luis, their mother asked why they refused to go and the children disclosed the secret about the sexual abuse. She called the police and said that Luis had sexually molested her two boys. Luis was arrested and was accussed of undressing the boys and himself and then rubbing his penis against the children until he ejaculated. The six year old reported that Luis would sit down on the toilet and place the child on top of him, and then rub. There was no report of penetration.

Luis had no previos police record, nor had anyone ever accused him of child molestation or abuse. Luis denied the accusations.

The Court social worker interviewed Jose and asked him about his early experiences with Luis; whether he had sexually abused when he was ten. Jose stated that Luis had never "gotten fresh" with him, nor had he implied any type of sexual contact. He said that if this had been the case, he would not have let Luis near his children.

Jose's children had been brought to court a couple of times. They were interviewed individually by the prosecutor, the Court social worker, and the public defender. Each time an interpreter was used as the children spoke no English.

The social worker described the scene as "horrible" with the children being interviewed by too many people. She said "it is awful for the kids, and to do the interview through an interpreter makes matters worse". The social worker did most of the questionning. She was very frustrated at not being able to speak the language and the lack of bilingual bicultural

personnel in the Court system. She believes that if she had spoken the same language as the children she might have been able to get more information than she was able to get through an interpreter.

The children stuck to their stories. As described, by the social worker, while these children were being interviewed and while they were telling their story about how Luis would touch them and rub his penis against them, they appeared unaffected. Both of the children were being prepared for a jury trial, as Luis had requested a jury.

During the preparations for the trial, the child was told about the oath through an interpreter. The social worker was not pleased with the process, believing that the child was uncapable of understanding what was meant by an "oath". The social worker felt frustrated because she couldn't understand what was being said, nor how accurately the interpreter was translating the English.

When it came time for the jury trial the six year old refused to take the oath. The social worker did not understand what had happened, but without this child's testimony, there could be no trial. The case was closed and Luis was released.

Questions

1. What are the problems with children as witnesses?

2. What changes are needed in the court room and court preparation procedures to make sure that children are able to testify?

3. What are the main problems with the use of an interpreter in child abuse cases?

4. What recommendations would you make to address the problems of use of an interpreter?

Case 6

This case is about a seventeen year old girl named Luisa who was raped by a gang member and then emotionally abused by her father. This case was referred to a Court social worker by Luisa's lawyer in an attempt to determine the mental and emotional status of this girl after she tried to kill her father with a butcher knife.

Luisa is the oldest of several girls who live at home with both parents. The parents are monolingual Spanish speaking and the daughters are bilingual. Prior to the incident Luisa was a virgin and an "A" student at a local school.

A group of gang members lived in the same building as Luisa and her family. One of the members,, Juan, was interested in Luisa. He watched her often as she came in or left the building, but in several occassions she let Juan know that she was not interested in him. One day as Luisa was entering the building Juan grabbed Luisa and forced her into his apartment. He raped her. After the rape, Juan threatened Luisa that if she said anything about this to anyone, he would kill her. She believed him and kept quiet about the rape.

Luisa's father was friends with some of the gang members, and one night when he was out drinking with them, Juan began bragging to Luisa's father that he "had made love to his daughter" and that she was good in bed, etc. The father left the bar mad and drunk. When the father got home he woke up Luisa, beat her up all the while calling her a whore. He continued to hit her as she ran out of the apartment. A police officer spotted her and stopped her. He took her to the emergency room.

At the E.R., she was told to call her mother and to tell her about the rape. The mother came to the E.R. and was very supportive of the daughter. Luisa and her mother decided that it was best if Luisa stayed at a cousin's house until her father calmed down. She stayed with her cousin for a couple weeks, and then returned home.

Luisa was home for a few weeks when her father began harassing her verbally again. He called her a whore and told her that he did not believe that she had been raped, rather that she had gone to bed voluntarily. Every time the father drank, he would begin accussing Luisa. After a period of time, Luisa became frustrated by her father's harrassment. During one of his drunken periods, while yelling at her, Luisa went into the kitchen and took a butcher knife. She threatened to kill him. The police were called, and Luisa was arrestd.

The social worker from the Court interviewed Luisa and was impressed with her. She described her as a "very sophisticated young lady, articulate, and very mature". Luisa was referred to the YWCA Sexual Assault Unit. The mother remained very supportive throughout this whole ordeal. The father eventually left the house. The family doesn't know of his whereabouts.

Questions

1. What issues do you see in this case?

2. How could have Luisa's family help her?

Case 7

The following case concerns an alleged kidnapping of a 12 year old Puerto Rican girl named Nilda, by her 15 year old boyfriend Jorge. The alleged kidnapping took place in the bathroom of the school that the girl attends. According to the report by the Court social worker Nilda was in the bathroom when Jorge and another boy grabbed her, put her into a car and drove her to a hotel. Nilda was kept a prisoner in this hotel for ten days. Food was brought to her by Jorge, a sixteen year old boy, and a pregnant seventeen year old.

After her release, Nilda called a girlfriend and told her of her ordeal. The friend called Nilda's mother, who then called the police. The mother had previously filed a missing child report. The police questioned Nilda at her home about the kidnappers. Nilda provided descriptions, and the kidnappers were all arrested.

Everyone was released on bond, except for the pregnant girl. She remained in prison for three weeks. She couldn't post the bond. A few weeks after the arrest of the kidnappers, Nilda and her mother went to see

the court social woker. A report was filed by Nilda and her mother stating that Nilda had lied about everything that had happened to her. The mother told the social worker that Nilda was emotionally sick; that she had spent time in a New York Psychiatric hospital.

The kidnappers were apparently members of a youth gang. Nilda's mother is a religious pentecostal and very afraid of gang members. It is possible that out of fear or threats that Nilda and her mother withdrew the charge of kidnapping.

The Court social worker checked with the State for any prior family records. Nilda had reported at one point during an interview with the social worker that her mother had beaten her and she had run away from home. There were no prior complaints. In the final analysis, it is unclear in this case as to whether there was kidnapping, or if Nilda had been beaten and ran away.

Questions

1. What are the issues in this case?

2. How would you find out if Nilda was telling the truth?

3. Is the truth important in this case? Why?

CASE B

This is an alleged physical abuse case of a six month old baby girl. She was brought in to the emergency room by her 17 year old monolingual Spanish speaking mother. The mother is a single parent who recently arrived from Puerto Rico. The baby presented at the hospital with second and third degree burns on her right leg. The mother reported that the baby was burned when she mistakenly turned on the hot water faucet while she was bathing her in the sink.

Once the physician heard what happened, he suspected "possible child abuse". The case was referred to a bilingual social worker. The mother explained to the social worker that she didn't know that the water was that "hot"; that in Puerto Rico the water was lukewarm. She assumed that the water temperature would be the same here. The mother further stated that she believed the water was "too hot" in the apartment. The social worker went home with her to confirm her story. She discovered that the temperature of the hot water was too high, and had the boiler lowered in the apartment.

The hospital social worker referred this case to the Visiting Nurse Association, as she could see no cause to refer it to the Sstate. The social worker believed that the mother was telling the truth, and that the child appeared to be happy and well cared.

The social worker had the mother interviewed by three different people and her story remained consistent. They were looking for inconsistencies, but found none. This particular technique, the re-interviewing by several different workers has helped in identifying abuse. The social worker felt

that had she not been bilingual and familiar with the culture, this mother would have gone through an unnecessary trauma.

Questions

1. Do you agree with the social worker that if someone non-Spanish speaking would have handled the case, the mother would have gone through an ordeal, maybe accused of child abuse? Why?

2. Why do you think the doctor suspected child abuse?

3. What guidelines can you develop to assist non-social workers, such as teachers, health professionals and others to identify abuse?

4. Is this a child abuse case?

Case 9

This is a case of physical abuse of two children aged two and five, Emilio and Elsa. The children were admitted to the hospital, Elsa had multiple facial bruises and a third degree burn on her left thigh. The mother claimed that she fell and burned herself on the bathroom heater. Emilio was admitted with three large third degree burns the size of tennis balls on his buttocks. The burns were scabbed over and infected. He had a 101 degree temperature. The burns required surgery. Emilio stated that the mother's boyfriend, Luis, did it.

Upon further inspection, the physicians noticed finger tip burises over the face of Elsa, indicating that someone had tried to force her to sit. The mother continued to stick by her story that the children fell and backed into the heater. She also stated that Emilio did not have any burns, rather a rash. She said the rash turned into blisters and she popped the blisters.

The mother is seven months pregnant by Luis. Elsa and Emilio are not the children of Luis. The mother insists that Luis is good with the children, and that Emilio lied about where he got the burns. She gave an example of when Emilio stated that Luis had put him on the wall with a nail. The mother insisted that the nail would have been too small to hold Emilio, therefore Emilio must have been lying. She also stated that she has never left the children alone with Luis.

Elsa during an interview with the mother, appeared nervous, yet distant. She cried periodically and would refuse to speak. When asked how Elsa got her facial bruises, the mother responded "why should I tell you when you won't believe me anyways".

Due to the severity of the injuries and the inconsistent stories, the hospital social worker explained that the children would not be allowed to return home.

The mother has no relatives in town, while the mother eventually signed permission to place the children in temporary shelters, she was unhappy about foster care for the children and preferred that they be sent to her mother in Puerto Rico.

Emilio received extensive surgery which was extremely painful, requireing that he be sedated much of the time. Emilio was also involved in play therapy. During the course of the therapy he cried a lot because

of the burns and reports of frequent beatings by Luis. Emilio required further therapy, skin grafts, and physical therapy due to the lack of mobility in his buttocks.

It was discovered later that Luis had beaten the mother a year earlier, but the mother dropped charges. She stated that Luis never hit her again.

The mother continued to stick with her story that Emilio had a rash and Elsa had fallen. A threat of arrest did not cause her to change her story.

Two weeks after the incident, both the mother and Luis were arrested for Risk of Injury and Assault. At the show cause hearing, the mother contested the charges. During this time a home study was conducted of the grandmother in Puerto Rico.

The grandmother's home was found adequate for the children. She was given custody of them until it was determined that the mother could provide a safe environment for her children.

The children were put into foster care until they could be sent to P.R. The mother and the court agreed to a compromise before totally consenting to sending the children to P.R. The mother asked the court to wait for one month before sending the children to Puerto Rico, while she appealed the chargge. The court agreed.

The mother had her baby and the child was considered at risk. The mother expressed some interest in returning to P.R. But it was made clear that she would not regain custody of the children, although she would be able to visit them. This case remains open.

Questions

1. What are the issues in this case?

2. How would you handle such a case?

3. Was the court right in granting the mother's wishes?

4. What are the dangers in sending the children to Puerto Rico?

5. What are the dangers in placing the children in foster care?

Case 10

This case is of a 10 year old boy, Marcelo, who lives with his 24 year old mother and her boyfriend, Martin. There are other children in the family but they are not living at home, the reason in not known.

Marcelo came to school one day with bruises all over his face, neck and body, he had bumps on his head. When the teacher questionned him, he told the teacher that his mother's boyfriend had beaten him. Although, the mother has witnessed these beatings, anytime she tries to intervene, the boyfriend beats her up as well.

Apparently the boyfriend drinks and uses drugs and as reported by Marcelo "he's always high". Martin, the boyfriend uses drugs in the presence of Marcelo. Upon further investigation, Marcelo was placed in temporary foster care in a local "all boys institution". As reported by a social worker Marcelo adjusted well to his new "home", he seemed to like it and was doing well. He is attending school and counseling.

While the child was temporarily removed from the home; the social worker tried to reunite the family to see if they all can work something out for the child's welfare. On one of the home visits, Marcelo said to the social worker that he didn't want to go back to visit his mother. He reported that while he was visiting with her, she was accusing him of causing trouble, blaming him for her boyfriend leaving and verbally abusing him. Marcelo was afraid to go back to visit with her.

This case is in the Juvenile Court. During the hearing, Marcelo's mother denied the allegations. The case is still pending and as reported by the mother's court appointed advocate, it's been difficult to contact the mother, letters have been sent, telephone calls and home visits were made. She has failed to appear in court, the disposition of this case is unclear.

Questions

1. What concerns would you have about sending Marcelo back home?

2. What concerns would you have about leaving him in foster care?

3. What strategies would you use to help unite the family?

Case 11

This case is of a two and half year old boy, Ramon. Ramon was brought to the emergency room by his mother, Teresa, with facial trauma. He had blisters all over his face. The mother told the doctor that Ramon had fallen down the stairs. The doctor checked for other bruises on Ramon's body and found none. While the doctor was examining Ramon he noticed that there was no interaction between Ramon and the mother. Teresa appeared distracted and was laughing inapropriately (she was staring into space and at times was laughing for no apparent reason). The doctor was concerned about Ramon's develomental stages, he appeared younger than his chronological age. Ramon couldn't talk. A hearing test was done and the results were normal.

Teresa is a single parent, in her 20's. She is monolingual Spanish speaking, and has two older sons that live in P.R. with their grandmother. Teresa has been institutionalized in a Psychiatric hospital three times in P.R.

Ramon's case was referred to the hospital social worker for possible child abuse. The hospital social worker then referred it to the State. A meeting was called with Teresa, the hospital social worker, the doctor, and the State social worker. Teresa was very upset when she was told the reason for the meeting. At one point she screamed at the social worker.

Upon further questionning the nature of the facial trauma, it was

decided to visit the site where Ramon had fallen. As reported by the social worker that visited the home, it was possible for Ramon to have fallen down the stairs and received facial bruises, but he should have other bruises on other parts of his body.

This case was presented to the hospital child protective team. There was not enough evidence to prove child abuse. Teresa was asked to place Ramon temporarily in a foster home while there was further investigating. Teresa refused. The case was referred to the Visiting Nurse Association and Project First Step for parenting skills. The hospital social worker referred Ramon to the outpatient baby clinic for a psychological evaluation.

Questions

1. What problems do you see in this case?

2. How would you have handled it differently? Why?

Case 12

The following case summary was reported by a social worker from the Juvenile Court.

The facts of this case are as follows: Both mother and father of the child in question are under 25 years of age. The child is alleged to have been sexually abused. The perpretator is alleged to be the father. The father, mother and the child were all positively tested as having a

particular veneral disease. A referral was made to the State because of the positive test.

The child was enrolled in counseling. Both parents were employed at the time of the alleged incident. Rather than filing in the Juvenile Court, the family (i.e.mother) chose to file in Family Court to attempt to modify the custody order from joint to sole custody by the mother. Both parents retain their own counsel.

The State filed petitions in the Juvenile Court only after it was apparent that it was necessary to safe guard the best interest of the child. The case is still pending.

This differs from "typical" cases in that both parents are equally involved and interested in their child. They are both English speaking. Both are employed and have retained their own counsel. The parents agreed to cooperate with the State and the mother followed through with appropriate legal action. The State came to the Juvenile Court as a last resort, not a first remedy.

The areas of similiarity between this and other Hispanic cases are these:

1. The child was born out of wedlock to very young parents.
2. The extended families to both parents are actively involved.
3. The mother has a child from another relationship which she continues to maintain.
4. Finally, there is an under-tone of fear on the part of the mother, father, and his family.

Questions

1. The worker pointed out the similarities between this case and other Hispanic cases, what are some differences?

2. Do you think the family would have been treated differently had the parents been unemployed? Spanish speaking only? Single parent?

Case 13

The following is a case example of sexual abuse. Julia is a 15 year old Puerto Rican girl. Julia lives with her mother and two sisters.

Julia's father lives out of state. Her mother remarried. Apparently Julia had reported to her mother seeing an "imaginary friend" telling her to kill herself and her teacher. She was admitted to a local inpatient psychiatric hospital. Julia was discharged and she was sent out of the state to live with her father. The father sent her back to the mother.

Julia was back in school and staying at home with her mother and sisters when one day she called the social worker at the hospital where she had been a patient. Julia told the social worker that she wanted to return to the hospital. She reported being depressed, that at home there were too many fights. She also reported that her mother's boyfriend had touched her leg and had gone up to her room and was looking at her "strangely". The hospital social worker reported the case to the State.

The social worker met with Julia and during the interview, Julia cried a lot. Julia stated that she doesn't get along with her family and that she was going to kill herself. The social worker tried to get Julia admitted in the hospital, but there were no beds available. She then referred her to an outpatient mental Health Center. Julia did not want to return home because she was afraid of her stepfather. Apparently he drinks. Julia's mother works, and apparently there's no place for Julia to stay until her mother gets off work.

A bed became available in the hospital, but Julia was no longer interested. Julia told the social worker that the reason why she did not want to go was that her sisters teased her and called her "crazy". Julia's mother didn't know about the sexual abuse incident. Julia was afraid to tell her for fear that she would be blamed.

The State social worker met with Julia's mother and told her about the sexual abuse. The mother was very supportive.

Julia's mother called her ex-husband and told him about the abuse. Julia was sent to stay with her father for safety reasons. Julia's mother decided to leave her boyfriend, but she was afraid that if Julia was around, the boyfriend may hurt Julia.

Questions

1. How would you describe the mother in this case? Why?

2. What resources did Julia need to address her problem with her stepfather?

Case # 14

This case is of a 14 year old girl, Ramonita. Ramonita's family consist of a stepfather, mother, two brothers and three older sisters that live on their own.

Ramonita's mother, Lucy, complained to the school principal where Ramonita attends, that she couldn't control Ramonita. She reported that Ramonita came home late and that she's been smoking marihuana.

The school principal reported the case to the State. Upon further investigation it was found that Ramonita had also been complaining about her mother, Lucy, and her stepfather to the school teacher. Ramonita stated that her mother and stepfather wanted her out of the home, that her stepfather had tried to sexually abuse her. He tried touching her buttocks and her breast. Ramonita reported that he drinks.

Ramonita further stated that her stepfather's 27 year old son had also tried to sexually abuse her. He tried many times to touch Ramonita around her breast and the vagina area. Apparently there has been a history of sexual abuse with Ramonita's older sisters and their stepfather and his son.

The social worker met with Lucy and told her about the sexual abuse. Lucy acknowldeged that her husband was "indeed fresh", but that it was difficult for her to believe the accusations. She described him as a very "serious man" and that "he wouldn't do such things."

This case was referred to an outpatient mental health center for family therapy. After a few sessions Ramonita stopped going. Lucy continuted in therapy.

The situation at home didn't improve, Ramonita continued staying out late, and smoking marihuana. Lucy and the social worker decided to have Ramonita placed in a shelter for youth The decision for placement was made after Ramonita hit her stepfather.

Ramonita didn't like the shelter and she called the social worker the next day to come and get her. Arrangements were made for another shelter and Ramonita was transfered. Apparently Ramonita was having problems in the other shelter and was given a chance to stay, but if she fails to comply with their rules she was going to be asked to leave.

The social worker was frustrated with this case. She reported that Ramonita had exhausted all the resources and that there was not much she could do. She described Ramonita's attitude as "very disruptive, nasty, selfish and cold". She also reported that she has other cases that are more important and require her time.

Questions

1. What issues do you see in this case?

2. What strategies would you use?

. . . .

3. Why do you think Ramonita has an attitude?

CASE # 15

This case involves a father and his three year old daughter, who we will call Lisa. Mr. Ortiz describes his relationship with his daughter, Lisa, as very close. One day Mr. Ortiz took Lisa to a doctors appointment. His wife works during the day and since Mr. Ortiz workes evening, he is able to make such appointments.

While in the waiting room, a social worker observed that Lisa kissed her father on the lips. The social worker thought this was "inappropriate" and reported the father to the State Child Protection Agency for "alleged" sexual abuse.

The father was shocked and quite disturbed at the allegation. After full investigation, the State found that no sexual abuse existed.

Unfortunately, Mr. Ortiz refuses to care for Lisa or to be in public with her, unless his wife is present. The relationship between Mr. Ortiz and his daughter has suffered, with Mr. Ortiz reporting feeling depressed and confused.

QUESTIONS

1. What happened in this situation?

. . . .

2. How would you have handled this situation?

Case # 4

Ana a frightened 24 year old mother of two children, boys age 6 and 8, a single parent and on public assistance, has a history of admissions to a local mental institution. Hospital staff diagnosed Ana as a chronic schizophrenic. Ana's lenghth of stay in the hospital is usually between 1 to 3 months.

The State Child Protection Agency placed the children in temporary shelter while the mother was in the hospital. Ana's condition has deteriorated to the point that she's in the hospital seven months out of the year.

The State filed petitions in the Juvenile Court after it was apparent that it was necessary to safeguard the best interests of the children. At the hearing Ana was very quiet, she answered questions with monosyllables and kept looking down at the floor. There was no eye contact. Ana does not speak English and all the communication had to be done through an interpreter.

The Judge and the lawyer not understanding the language or the culture assumed that Ana did not care about what was happening with the children. The interpreter was a Puerto Rican female court advocate that was able to explain to the judge and the lawyer why Ana looked down at the floor while they were speaking to her. She told them that was a sign of respect for authorities.

Ana was allowed to keep her children with the condition that she enter therapy.

Questions

1. What issues do you see in this case?
2. How would you address them?

3. Give an example of a cultural behavior from your background in situations of:
   the church
   parents
   children
   marriage
   work
   family

4. What resources does the mother need to address her problems in interacting with institutions?